

Chapter Advisor Order Form for DECA Discount Tour Tickets

(See accompanying sheets for specific information.)

This form is for chapter advisors to use when ordering individually.

Please reserve the following tickets:

"DECA Takes You Places" Lanyard

No. of lanyards _____ X \$5 = Subtotal _____

DECA Day at Universal Studios®/Universal's Islands of AdventureSM Saturday, April 26, 2003

One-day, One-park ticket with transportation No. of tickets _____ X \$39 = Subtotal _____

One-day, One-park ticket without transportation No. of tickets _____ X \$34 = Subtotal _____

Two-day, Two-park ticket with one day of transportation No. of tickets _____ X \$62 = Subtotal _____

Two-day, Two-park ticket without transportation No. of tickets _____ X \$57 = Subtotal _____

DECA Day at Walt Disney® World Theme Parks Tuesday, April 29, 2003

One-day, One-park ticket with transportation No. of tickets _____ X \$42 = Subtotal _____

One-day, One-park ticket without transportation No. of tickets _____ X \$36 = Subtotal _____

3-day Park Hopper ticket with one day of transportation No. of tickets _____ X \$119 = Subtotal _____

3-day Park Hopper ticket without transportation No. of tickets _____ X \$113 = Subtotal _____

DECA Day at Sea World Orlando

Sunday, April 27, 2003

With transportation No. of tickets _____ X \$40 = Subtotal _____

Without transportation No. of tickets _____ X \$35 = Subtotal _____

Wet 'n Wild

Without transportation No. of tickets _____ X \$22 = Subtotal _____

Pirate's Dinner Adventure

Thursday, April 24, at 8:30 p.m. No. of tickets _____ X \$20 = Subtotal _____

Friday, April 25, at 8:30 p.m. No. of tickets _____ X \$20 = Subtotal _____

Sunday, April 27, at 8:30 p.m. No. of tickets _____ X \$20 = Subtotal _____

Monday, April 28, at 8:30 p.m. No. of tickets _____ X \$20 = Subtotal _____

Wednesday, April 30, at 8:30 p.m. No. of tickets _____ X \$20 = Subtotal _____

Total Enclosed _____

Method of Payment



Check/PO/
Money Order
Enclosed



VISA/MasterCard (Add 3% service charge to pay by credit card.)

CARD # _____ Expir. date: _____ / _____

Billing address on credit card:

Name _____

Address _____

City _____ State _____ ZIP _____

Total amount charged
on credit card (includ-
ing 3% service charge)

\$ _____

Signature: _____

Preconference rates only apply to **PAID** orders received by DECA Inc. by **March 24, 2003**.

Tickets can be picked up at DECA Headquarters in the Orange County Convention Center.

Chapter Advisor's Name _____

School Name _____ School Phone _____

School Address _____ City _____ State _____ ZIP _____

E-mail _____

School fax _____

Send completed form with payment to:
DECA ICDC Discount Tickets
1908 Association Drive
Reston, VA 20191-1594

For further information, contact the
Marketing Department at DECA Inc.:
(703) 860-5000

Payment must accompany all orders.

ONLY ONE CHECK, P.O. OR MONEY ORDER PER FORM.